



JPW  
Box 529

PTO/SB/22 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|                                                                                                                                                                                                                                                           |            |                                                   |           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------|-----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2006</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)                                                                                                |            | <b>Docket Number (Optional)</b><br>12810-00141-US |           |
| <b>Application Number</b> 10/519,947-Conf. #5032                                                                                                                                                                                                          |            | <b>Filed</b> December 29, 2004                    |           |
| <b>For</b> USE OF AHAS MUTANT GENES AS SELECTION MARKER IN POTATO TRANSFORMATION                                                                                                                                                                          |            |                                                   |           |
| <b>Art Unit</b> 1638                                                                                                                                                                                                                                      |            | <b>Examiner</b> D. H. Kruse                       |           |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |            |                                                   |           |
|                                                                                                                                                                                                                                                           | <u>Fee</u> | <u>Small Entity Fee</u>                           |           |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))                                                                                                                                                                                                    | \$120      | \$60                                              | \$ _____  |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))                                                                                                                                                                                        | \$450      | \$225                                             | \$ 450.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))                                                                                                                                                                                                 | \$1020     | \$510                                             | \$ _____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))                                                                                                                                                                                                  | \$1590     | \$795                                             | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))                                                                                                                                                                                                  | \$2160     | \$1080                                            | \$ _____  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.                                                                                                                                                                           |            |                                                   |           |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.                                                                                                                                                                                    |            |                                                   |           |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                                               |            |                                                   |           |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.                                                                                                                     |            |                                                   |           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-2775</u> . I have enclosed a duplicate copy of this sheet.                     |            |                                                   |           |
| I am the <input type="checkbox"/> applicant/inventor.                                                                                                                                                                                                     |            |                                                   |           |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).                                                                                                     |            |                                                   |           |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>55,421</u>                                                                                                                                                        |            |                                                   |           |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____                                                                                                                                    |            |                                                   |           |
| <u>Roberte Makowski</u><br>Signature                                                                                                                                                                                                                      |            | <u>July 12, 2007</u><br>Date                      |           |
| <u>Roberte M. D. Makowski, Ph.D.</u><br>Typed or printed name                                                                                                                                                                                             |            | <u>(302) 658-9141</u><br>Telephone Number         |           |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                                     |            |                                                   |           |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.                                                                                                                                                                                           |            |                                                   |           |

07/16/2007 SLUANG1 00000008 032775 10519947

01 FC:1252 450.00 DA

552223\_1